



Department of the Treasury
Federal Law Enforcement Agencies
PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER CR No. 10-10414-WGY	
DEFENDANT KEVIN B. KELLY		TYPE OF PROCESS PRELIMINARY ORDER OF FORFEITURE	
SERVE AT	Name Of Individual, Company, Corporation, Etc.. to Serve or Description of Property to Seize Brendan Shortell, Esq., Lambert & Associates		
	Address (Street or RFD / Apt. # / City, State, and Zip Code) 92 State Street, Boston, MA 02109		
Send NOTICE OF SERVICE copy to Requester: VERONICA M. LEI, ASSISTANT U.S. ATTORNEY UNITED STATES ATTORNEY'S OFFICE John Joseph Moakley United States Courthouse 1 Courthouse Way, Suite 9200 Boston, Massachusetts 02210		Number Of Process To Be Served In This Case.	
		Number Of Parties To Be Served In This Case.	
		Check Box If Service Is On USA	
SPECIAL INSTRUCTIONS or OTHER INFORMATION TO ASSIST IN EXPEDITING SERVICE (includes Business and Alternate Addresses, Phone Numbers, and Estimated Availability times.) Please serve the attached Preliminary Order of Forfeiture upon the above-named individual by certified mail, return receipt requested.			
JRL x3280			
Signature of Attorney or other Originator requesting service on behalf of 		<input checked="" type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant	Telephone No. (617) 748-3100
		Date April 4, 2011	
SIGNATURE OF PERSON ACCEPTING PROCESS:			Date
SPACE BELOW FOR USE OF TREASURY LAW ENFORCEMENT AGENCY			
I acknowledge receipt for the Total # of Process Indicated.	District of Origin No. _____	District to Serve No. _____	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER:
Date			
I hereby Certify and Return That I <input type="checkbox"/> PERSONALLY SERVED, <input checked="" type="checkbox"/> HAVE LEGAL EVIDENCE OF SERVICE, <input checked="" type="checkbox"/> HAVE EXECUTED AS SHOWN IN "REMARKS", the Process Described on the Individual, Company, Corporation, Etc., At The Address Shown Above or at the Address Inserted Below.			
<input type="checkbox"/> I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC. NAMED ABOVE.			
NAME & TITLE of Individual Served If not shown above:		<input type="checkbox"/> A Person of suitable age and discretion then residing in the defendant's usual place of abode.	
ADDRESS: (Complete only if different than shown above.)		Date of Service 04-11-2011	Time of Service <input type="checkbox"/> AM <input type="checkbox"/> PM
		Signature, Title and Treasury Agency Barry R. Small, F&F Officer - DHS-CBP	
REMARKS:			

TD F 90-22.48 (6/96)

☐ RETURN TO COURT
 ☐ FOR CASE FILE
 ☐ LEAVE AT PLACE OF SERVICE

☐ FILE COPY

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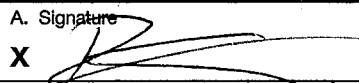
SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Brendan Shortell, Esq.
Lambert & Associates
72 State Street
Boston, MA 02109

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  ☐ Agent
☒ Addressee
- B. Received by (Printed Name) _____
- C. Date of Delivery 4/11/11
- D. Is delivery address different from item 1? ☐ Yes
☒ No
 If YES, enter delivery address below:

3. Service Type
- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

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(Transfer from service label)